

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		<i>8/9/06</i>
O.I.P.E. CLASSIFIER		<i>1-2</i>	<i>8/11/06</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		<i>69665</i>	<i>10-3-06</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 ii Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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